

**PATENT**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Application of : Clark, et al.  
For : OUTPUT CHOKE FOR D.C. WELDER  
AND METHOD OF USING SAME  
Serial No. : 09/842,002  
Filing Date : April 25, 2001  
Group Art Unit : 2832  
Last Action : November 21, 2003  
Examiner : Tuyen T. Nguyen  
Our Docket : LEEE 2 02188-4

**SUPPLEMENT TO FIFTH AMENDMENT**

Commissioner for Patents  
Mail Stop Non-Fee Amendment  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

In supplement to the Fifth Amendment filed on December 11, 2002 in response to the non-final Office Action dated November 21, 2003, please amend the above referenced patent application as follows:

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an envelope addressed to Commissioner for Patents,  
P.O. Box 1450, Alexandria, VA, 22313-1450

on 03-26-04

W. Cox

(SIGNATURE)

03-26-04

2832

In re application of: Clark, et al.

Serial No. 09/842,002

Filed: April 25, 2001

For: OUTPUT CHOKE FOR D.C. WELDER AND METHOD OF USING SAME

COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated as shown below.

Claims as Filed or Amended						
(1)	(2) Claims Filed or Remaining After Amendment	(3)	(4) Highest No. Previously Paid For	(5) Present Extra	(6) Rate	(7) Total Amount
Total Claims	* 67	Minus	** 67	0	\$18	\$ 0.00
Indep. Claims	* 3	Minus	*** 4	0	\$84	\$ 0.00
Total Additional Fee For this Amendment --->						\$ 0.00

\* If the entry in Column 2 is less than the entry in Column 4 write "0" in Column 5

\*\* If the "Highest No. Previously Paid For" is less than 20 write "20".

\*\*\* If the "Highest No. Previously Paid For" is less than 3 write "3".

A check in the amount of \$ \_\_\_\_\_ to cover the required Fee is enclosed.

X **General Authorization to Charge Deposit Account For All Required Fees, Fees Under 37 C.F.R. 1.17, or All Required Extension of Time Fees.** Should any additional fees be required in connection with this application, **during the entire pendency of the application**, the Commissioner is authorized to charge any fees which may be required, or credit any overpayment to Account No. 06-0308. This transmission form is submitted in triplicate.

FAY, SHARPE, FAGAN, MINNICH & McKEE

By: ROBERT V. VICKERS

Reg. No. 19,504

1100 Superior Avenue, Seventh Floor  
Cleveland, Ohio 44114-2579

Phone: (216) 861-5582

Fax: (216) 241-1666

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Y. R. Cox  
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03-26-04



AMENDMENT TRANSMISSION  
CORPORATIONS (LARGE BUSINESSES)  
DOCKET NO. LEEE 202188-4

In re application of: Clark, et al.

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ROBERT V. VICKERS

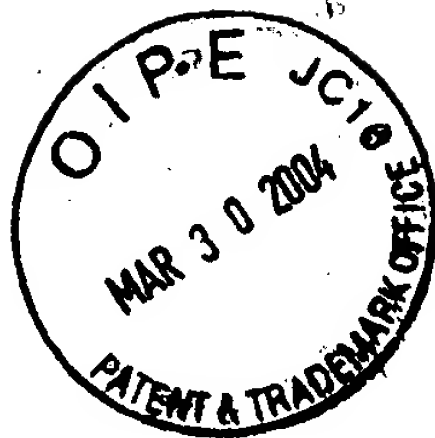
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